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CONFIRMATION NO. 2332

<b>SERIAL NUMBER</b> 10/623,813	<b>FILING OR 371(c) DATE</b> 07/22/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1643	<b>ATTORNEY DOCKET NO.</b> 0609.4560003/KRM/DJN
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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 09/720,086 07/23/2001 \* which is a 371 of PCT/US99/14373 06/25/1999 which claims benefit of 60/093,993 07/24/1998 and claims benefit of 60/090,906 06/25/1998  
 (\*)Data provided by applicant is not consistent with PTO records.

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 08/19/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 65	<b>TOTAL CLAIMS</b> 55	<b>INDEPENDENT CLAIMS</b> 19
Verified and Acknowledged	Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				

**ADDRESS**

26111

**TITLE**

De novo DNA cytosine methyltransferase genes, polypeptides and uses thereof

<b>FILING FEE RECEIVED</b> 2906	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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